



**City of Port St. Lucie Building Department**

121 SW Port St. Lucie Blvd

Port St. Lucie, FL 34984

772-871-5132 • Web Site: <http://www.cityofpsl.com>

To Schedule Inspections <http://pandapublicweb.cityofpsl.com>

**Structural Opening  
Permit Application**

Construction under this permit will be done in accordance with the FBC 6th Edition (2017)

PERMIT # \_\_\_\_\_ PIN # \_\_\_\_\_

PROPERTY ADDRESS				
LEGAL DESCR	SECTION	BLOCK	LOT	Parcel ID#
OWNER		MAIL ADDRESS		ZIP PHONE CELL
CONTRACTOR		MAIL ADDRESS		ZIP STATE LIC. # PSL COMP #
CONTRACTOR E-mail Address		PHONE	FAX #	CELL
ARCHITECT/ENGINEER	MAIL ADDRESS		PHONE	LIC # E-MAIL ADDRESS
Commercial: <input type="checkbox"/> Residential: <input type="checkbox"/>				
Description of work: (ex., new door/window opening, enlarge/decrease opening, fill/close up opening)				
Detailed description of proposed work, including dimensions: _____				
Detailed location of proposed work: (ex., interior, exterior, front, side, rear, or roof) _____				
Does this opening involve a "fire rated" wall? <input type="checkbox"/> Yes <input type="checkbox"/> No *Note: A fire rated wall is considered a structural wall				
Sub-permits may be required for each trade depending on location of opening.				
NOTE: All structural work must have a prescribed detailed method of construction sealed by a florida licensed architect or structural engineer. A copy must be attached to this permit application when application is submitted.				
Valuation: \$	Applied Date:	Rec'd By:	Reviewed by/Date	<b>PERMIT FEE:</b>
This section to be filled in by Plan Review. Inspections required: ___/___/___/___/___/___ Final___ Plans Examiner ID: _____ Initial___				
THIS PERMIT BECOMES NULL AND VOID IF CONSTRUCTION OR WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.				
Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.				
OWNER'S AFFIDAVIT: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating to construction and zoning.				
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.				
IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.				
Signature of Contractor _____		Signature of Owner (Only if Owner-Builder) _____		
Date _____		Date _____		
Print Name _____		Print Name _____		
NOTARY PUBLIC, State of Florida _____		[NOTARIAL SEAL]		
State of Florida _____				
County of _____				
The foregoing instrument was acknowledged before me by means of ___ physical presence or ___ online notarization this ___ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.				

MUST BE COMPLETELY FILLED OUT

Form Created 08/29/2011 updated 01/17/20 1P

Payment Method: \_\_\_\_\_ Last 4 or Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_